CCW 2123

AU6 2 3 2005 5	of 1995, no per	enne are re	U.S. Patent and T	Approved for use through 04/30/2003. OMB 0651-0031 rademark Office: U.S. DEPARTMENT OF COMMERCE on of information unless it displays a valid OMB control number					
TRAUCHAS		· · · · · · · · · · · · · · · · · · ·	ation Number	09/884,821					
TRANSMITTAL FORM			Date	06/18/2001					
			lamed Inventor	Mallon					
(to be used for all correspondence after initial filing)		Art Unit		2123					
,		Exami	ner Name	Unassigned					
Total Number of Pages in This Submission	Attorne	ey Docket Number	017887-009000US						
ENCLOSURES (Check all that apply)									
Fee Transmittal Form	Drawin			After Allowance Communication to Group					
Fee Attached	Licensi	Licensing-related Papers		Appeal Communication to Board of Appeals and Interferences					
Amendment/Reply Petition		1		Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)					
After Final	Petition to Convert to a Provisional Application			Proprietary Information					
Affidavits/declaration(s)		of Attorney, Revocation e of Correspondence Address		Status Letter					
Extension of Time Request			imer	Other Enclosure(s) (please identify below):					
		st for Refund		1) Return Postcard					
Express Abandonment Request		CD, Number of CD(s)		2) PTO/SB/83 Request to Withdraw as Attorney					
☐ Information Disclosure Statement									
Certified Copy of Priority Document(s) Rema			The Commissioner is authorized to charge any additional fees to Deposi Account 20-1430.						
Response to Missing Parts/ Incomplete Application			J						
Response to Missing Parts under 37 CFR 1.52 or 1.53			_						
SIG	NATURE C	F APPL	ICANT, ATTORNEY,	, OR AGENT					
Firm Townsend and Crew LLP									
or Individual Phillip H. Albert	Reg. No. 35,819								
Signature MAC									
Date August 2005									
	CERTIFIC	CATE OF	F TRANSMISSION/M	AILING					
I hereby certify that this correspondence is being as first class mail in an envelope addressed to:	facsimile tran Commissioner	smitted to t for Patents	the USPTO or deposited wit i, P.O. Box 1450, Alexandria	th the United States Postal Service with sufficient postage a, VA 22313-1450 on the date shown below.					
Typed or printed name Christopher	R. Fitting	Λ	10						
Signature	-//		7 11	Date August 1, 2005					

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

RECOEST FOR WITHDRAWAL
AUS 2 3 2005 AND CHANGE OF
CORRESPONDENCE ADDRESS

	1 10/08/00 100 0
Application Number	09/884,821
Filing Date	June 18, 2001
First Named Inventor	Mallon
Art Unit	2123
Examiner Name	Unassigned
Attorney Docket Number	017887-009000US

To: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450										
Please withdraw me as attorney or agent for the above identified patent application, and										
all the attorneys/agents of record										
all the attorneys/agents (with registration numbers) listed on the attached paper(s), or										
all the attorneys/	nber	20350								
NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.										
The reasons for this request are: Client requests to transfer matter										
CORRESPONDENCE ADDRESS										
The correspondence address is NOT affected by this withdrawal.										
2. Change the correspondence address and direct all future correspondence to:										
Customer Number										
OR										
Firm <i>or</i> Individual Name	Brinks Hofer Gilson & Lione									
Address	NBC Tower, Suite 3600									
Address 455 N. Cityfront Plaza Drive										
City		State	Illinois		ZIP	60611- 5599				
Country	United States of America									
Telephone (312) 321-4723			(312) 321-4299							
Name Philip H. Albert										
Signature Registration No. 35,8				35,81	,9					
Date August 2005										
NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.										